MOUNT UNION AREA HIGH SCHOOL

Fundraiser Approval Form

Organization: _____

Advisor:

Type of Fundraiser:
_____

_____

Purpose of Fundraiser: _____

_____

Date(s) of Fundraiser:

_____ Yes/No Date _____
Administrative Approval

_____ Yes/No Date _____
Health and Wellness Approval (if selling food products)

_____ Yes/No Date _____
Superintendent Approval

_____ Yes/No Date _____
Board Approval